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| | |
|---------------------|--------------------|
| <i>Lori Allaire</i> | (Depositor's name) |
| <i>Lori Allaire</i> | (Signature) |
| <i>May 19, 2009</i> | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/553,381 | 07/19/2007 | Rolf Servin | PS0336 | 3666 |

TITLE OF INVENTION: MULTIDIMENSIONAL NMR SPECTROSCOPY OF A HYPERPOLARIZED SAMPLE

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|----------------|---------------------|-------------------------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 05/26/2009 |
| | | | | 05/20/2009 MGEBREM2 00000036 502665 | 10553381 | |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | 01 FC:1501 | 1510.00 DA | |
| ARANA, LOUIS M | 2831 | 324-307000 | | 92 FC:1504 | 300.00 DA | |

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2. For printing on the patent front page, list
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1. *Robert F. Chisholm*
 2. _____
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

GE HEALTHCARE AS

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

OSLO, Norway

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date *MAY 19, 2009*

Typed or printed name *Robert F. Chisholm*

Registration No. *39,939*

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